

Claim Denials

Top Denials

- HIPAA 5010
- Eligibility
- Duplicate
- Passport
- TPL
- Medicare
- Prior Authorization
- National Drug Codes (NDC)

HIPAA 5010

Denial Reasons

- Submitting HIPAA 4010 information
- Pay-to address is a post office box
- Zip Code + 4 missing or not on file
- Invalid qualifiers

Eligibility

Denial Reasons

- Client is not eligible for Montana Health Care Programs
- Date of service outside eligibility span
- Not eligible for service type
- Client ID invalid or missing
- Service limits exceeded

Exact Duplicate

You have already been paid for this service.

- Verify claim information on remittance advice (RA) to ensure accuracy.
- Review past RA for payment of service.
- Call Provider Relations for assistance.

Suspect Duplicate

You were already paid for this or a similar service.

- Conditions could be
 - Overlapping date of service
 - Similar procedure code

Duplicate Conflict

Another provider has been paid for this or a similar service.

- Verify that appropriate modifiers were used.
- Verify dates of service and procedure codes.
- View client records.

Passport

Denial Reasons

- Passport referral missing.
- Passport referral number invalid.
- Passport referral number invalid for date of service.

Passport Resolution

- Verify eligibility.
- Contact Passport provider.

Third Party Liability

Client has another insurance on file.

Denial Reasons

- Client has TPL, and no TPL amount present.
- Client has TPL, and no EOB is attached.
- Claim information and EOB do not match.
- TPL denial does not contain explanation of denial.

Medicare

Client has Medicare coverage on file.

Denial Reasons

- Client has Medicare, and not Medicare information is present.
- Medicare denied service as not medically necessary.
- Medicare EOB and claim do not match.
- Medicare denial reasons are not attached.

Prior Authorization

Procedure requires prior authorization.

Denial Reasons

- Prior authorization number missing or invalid.
- Prior authorization and claim do not match.
- Billed units or dollars exceed approved.
- Prior authorization used.

National Drug Codes (NDC)

Denial Reasons

- NDC required, but not present.
- Invalid NDC.
- Units missing.
- Qualifier missing.

Contact Information

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QUESTIONS?